PATE	NT APPLICAT		DETERN tober 1, 20		TION REC	OR	D		Ø,	5	005	23
-		SMALL TYPE	EN1	IIIY			R THAN					
TOTAL CLA	MS	1000	<u>mn 1)</u>	100	lumn 2\	7	RATI		FEE	7 7	RATE	L ENTITY
FOR		NUMB	NUMBER FILED N		MBER EXTRA		BASIC F	- -		OB	2.000	FEE (77/)
TOTAL CHAR	GEABLE CLAIMS	1//	41 minus 20= -		7/2			+		7	¥200	100
INDEPENDEN	CLAIMS .	1 1	(minus 3 •		2		XS 9:	╬		JOR	 	WY/
MULTIPLE DEI	PENDENT CLAIM	<u> </u>					X43•	-	•	OR	X86=	prix_
							-145:			OR	-290=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL	· L		OR	TOTAL	144
CLAIMS AS AMENDED - PART (I (Column 1) (Column 2) (Column 3)							SMAL	LEN	TITY	OR		THAN ENTITY
Total Independent	CLAIMS REMAINING AFTER AMENOMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	TI	DDI- ONAL FEE		RATE	ADDI- TIONAL FEE
Total	1.46	Minus	-20	2_	.26		X\$ 9=			OR	X\$18=	468
Independen		Minus	-3		.3		X43= ·	T		OR	X86=	258
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	T	-	OR	+290=	
	•			•		L	TOTA				TOTAL	
3.20.0	6 (Column 1)		(Columi	n 2)	(Cólumn 3)	^	IDDIT. FEI	-			400it. FEE	<u> </u>
	CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOU PAID FO	ST IR ISLY	PRESENT EXTRA		RATE	TIC	DDI. NAL		RATE	ADDI- TIONAL FEE
Total Independent	. 40	Minus	- 4	6	- '	Γ	X\$ 9=		\Box	OR	X\$18=	
Inoependent	. 6	Minus		6	=	ŀ	X43=	 	\vdash	OR	X86=	
PHIST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											- /	
1,12,	18,24,3	3,42,			•	L	+145= TOTAL	 -		ORL	+290=	
. '.	, , , , , , , , , , , , , , , , , , ,	/ '				À	OIT. FEE	<u> </u>	النه	OR A	DOM: FEE	/
	(Column 1)		(Column	1	Column 3)	_	· ·	AD	D: 1	_		ADDI-
	REMAINING AFTER AMENOMENT		PRÉVIOUS PAID FO	SLY	PRESENT EXTRA	ı	RATE	TIO	VAL	İ	RATE	TIONAL.
Total	•	Minus			-		X\$ 9=			OR T	X\$18=	
Independent	•	Minus	***				X43=			- I	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									\dashv	DR _		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							145=)R	+290=	
If the Highest No	imber Previously Pai imber Previously Pa	IS FOR IN THE	S SPACE IS les	es than '	20. enter "20."	ADI	TOTAL OIT, FEE]0)R id	TOTAL DOTT. FEE	
he Highest Nur	nber Previously Paid	For (Total o	Independent)	is the h	ighest number f	ound	in the app	copra	te box è	n colun	nn 1.	